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## BIB DATA SHEET

CONFIRMATION NO. 5477

<b>SERIAL NUMBER</b> 09/382,622	<b>FILING or 371(c) DATE</b> 08/25/1999 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1641	<b>ATTORNEY DOCKET NO.</b> PHO-107-DIV
<b>APPLICANTS</b> H. CRAIG DEES, KNOXVILLE, TN; TIMOTHY SCOTT, KNOXVILLE, TN; JOHN T. SMOLIK, LOUDON, TN; ERIC A. WACHTER, OAK RIDGE, TN; <i>828</i>				
<b>** CONTINUING DATA *****</b> This application is a CON of 09/216,787 12/21/1998 PAT 6,331,286				
<b>** FOREIGN APPLICATIONS *****</b> <i>Nme/19</i>				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY **</b> 09/09/1999				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/GAIL GABEL/</u> Examiner's Signature	<input type="checkbox"/> Met after Allowance GRG Initials	<b>STATE OR COUNTRY</b> TN	<b>SHEETS DRAWINGS</b> 4	<b>TOTAL CLAIMS</b> 32
<b>INDEPENDENT CLAIMS</b> 2				
<b>ADDRESS</b> EDWARD D MANZO COOK ALEX MCFARRON MANZO CUMMINGS & MEHLER LTD 200 WEST ADAMS STREET SUITE 2850 CHICAGO, IL 60606				
<b>TITLE</b> HIGH ENERGY PHOTOTHERAPEUTIC AGENTS				
<b>FILING FEE RECEIVED</b> 488	<b>FEES: Authority has been given in Paper</b> No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	